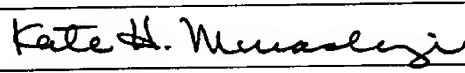


<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	See Attached Appendix	
	Filing Date	See Attached Appendix	
	First Named Inventor	See Attached Appendix	
	Group Art Unit	N/A	
	Examiner Name	N/A	
Total Number of Pages in This Submission	6	Attorney Docket Number	549172800000

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	Kate H. Murashige Reg. No. 29,959 Morrison & Foerster LLP 3811 Valley Centre Drive, Suite 500, San Diego, California 92130	
Signature		
Date	March 25, 2003	

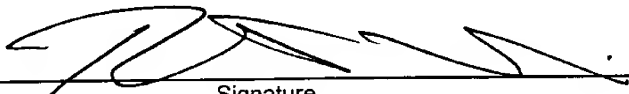
Application No. (if known): See attached

Attorney Docket No.: 549172800000

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Docket No.: 549172800000	Atty: Kate H. Murashige
Serial No.: See Attached Appendix	Filing Date: See Attached Appendix
Title: N/A	
Date of Mailing: March 25, 2003 via Facsimile	

**Papers enclosed herewith:**

1. Transmittal Form (1 page)
2. Revocation of Prior Power of Attorney and Power of Attorney By Assignee (2 pages)
3. Appendix A (1 page)
4. Change of Address (1 page)

THE STAMP OF THE UNITED STATES PATENT AND TRADEMARK OFFICE HEREON  
WILL ACKNOWLEDGE RECEIPT VIA FACSIMILE OF THE ABOVE DOCUMENTS